

APPLICATION FOR FACILITATOR TRAINING & CERTIFICATION

THE SAMURAI GAME®

COMPLETE & TRANSMIT BY EMAIL AS PDF OR SEND TO SECURE FAX +1-707-933-1246

Last Name _____ First Name _____ MI _____

Mailing Address _____

City _____ State/Province _____ Postal/Zip® Code _____

Country _____

Tel _____ (home) _____ (work) _____ (mobile) _____

Email _____ Website _____

Occupation _____

Company Name & Address _____

Your position with this organization _____

What is the nature of business for this organization? _____

Have you participated in the Samurai Game® as a “player”? _____ Yes _____ No

If “yes” – when/where/how many times _____

(If “no” – please understand that in order for you to proceed with training & certification you must participate in at least one Samurai Game® as a “player”)

Who was/were the facilitator(s) of your Samurai Game(s)® and what were the venues and approximate dates of the Game(s) in which you participated? _____

What experience do you have as a group process facilitator and leader of experiential exercises? _____

For what purpose do you desire to be trained and certified as an authorized Samurai Game® facilitator? _____

At this point who do you expect your target markets to be and where do you expect to deliver the Game? _____

If certified how frequently do you anticipate facilitating the Samurai Game®? _____

Please provide name/address/contact information of at least four professional references

If you have not already provided us with a copy of your most current vita or resume' then attach to this application and send to: Lance Giroux, c/o Allied Ronin Leadership Training & Consulting, PO Box 931 Petaluma CA 94953 USA – or send as pdf file attachment to info@SamuraiGame.org .

The Samurai Game® is an intense personal and group awareness simulation and it is a trademark registered with the United States government. The simulation's registered copyrights and trademark are owned by the Leonard Family Trust. All materials used in the promotion and conduct of the Game (whether by an individual facilitator or an organization) must reference George Leonard as creator/author of the simulation and identify the Leonard Family Trust as owner. Prior to certification each facilitator must sign a legally binding contract. Among other things this contract will spell out:

- ✓ the requirements and formula for per Game royalties to be paid by either the facilitator or the facilitator's client(s) – but always ensured by the facilitator to the owners,
- ✓ the length of time that individual certification will remain in force (currently five years),
- ✓ any requirements for recurring training in order to stay current,
- ✓ the requirements to notify the Game owners in advance each time the Game is to be produced.

Prior to your initial training event in pursuit of Samurai Game® facilitator certification you will be presented with a copy of the contract to read and understand. Do not proceed with the training and certification if you are unwilling to adhere to the contract requirements.

www.SamuraiGame.org info@SamuraiGame.org telephone 707.769.0328



Indicate method of payment: ___ check ___ Visa/Mastercard ___ wire

If Visa or Mastercard: Amount to bill card US\$ _____

Print Card # _____

Expiration date _____ / _____ / _____

Address where you receive your bill including postal code

Your signature _____ date _____

If paying by check, send payment to:

“Allied Ronin” PO Box 931, Petaluma, California 94953

**FOR BANK WIRE TRANSFER PAYMENTS CALL +1-707-769-0328
TO RECEIVE ACCOUNT AND ROUTING INFORMATION**